										Αŗ	plication o	r Dock	et Number		
F	PATENT A	PPLI		N FEE D			ON RECO	RD		0	9/26	889	V		
		CL		S FILED - I	PAR1		ımn 2)		SMAI TYP		ENTITY	OR _	OTHER SMALL		
FOR			NUMBE	R FILED		NUMBER I	EXTRA		RATE		FEE		RATE	FEE	
BASIC	FEE										395.00	OR	38.7	790.00	
TOTAL	CLAIMS		5	minus	20 =	*			x\$11=	=		OR	x\$22=		
INDEP	ENDENT CLAI	мѕ	/	minus	3 =	*			x41=	:		OR	x82=		
MULTI	PLE DEPENDE	NT CL	AIM PRES	SENT					+135	=		OR	+270=		
* If the	difference in colu	difference in column 1 is less than zero, enter "0" in column 2  TOTAL  OR						TOTAL	190.00						
		-	MS AS A	MENDED		RT II Column 2)	(Column 3)	_	SMA	۱LL	ENTITY	OR		R THAN ENTITY	
ENTA	10/19/2	REMA AF	AIMS AINING TER DMENT		N PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•		Minus	**	<b>λ</b> [:	=		x\$11	=		OR	x\$22=		
	Independent	* (	3	Minus	***	3	=		x41=	=		OR	x82=		
٨	FIRST PRES	ENTA	TION OF	MULTIPLE	DEP	ENDENT CL	ДИЛ	]	+135	=		OR	+270=		
	-	(Col	umn 1)		(0	Column <b>2</b> )	(Column 3)	, ,	TOT DDIT. F			OR	TOTAL ADDIT. FÆE		
ENT B	Po	REM AF	AIMS AINING TER IDMENT		PR	IIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DMI	Total	*	(	Minus	** (	<i>9</i> 0_	= /		x\$11	=		OR	x\$22=		
AMENDMEN	Independent	*	3	Minus	***	3	=/		x41:	=		OR	x82=		
۷	FIRST PRES	SENTA	ATION OF	MULTIPLE	DEP	ENDENT CL	_AIM		+135	<u>;</u> =		OR	+270=		
		(Co	lumn 1)		(	(Column 2)	(Column 3)	_	TO <sup>-</sup> ADDIT. F	TAL		OR	TOTAL ADDIT. FEE		
ENT C		REM A	AIMS IAINING FTER NDMENT		PR	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
IDMI	Total	*		Minus	*,*		=		x\$11	l=		OR	x\$22=		
AMENDMENT	Independent	*		Minus	***		=		x41	=		OR	x82=		
٨	FIRST PRE	SENT	ATION OF	MULTIPLE	DEF	PENDENT C	LAIM		+13	5=		OR	+270=		
*** if	the "Highest Nu	mber Pi	reviously Pa	aid For" IN TH aid For" IN TH	IS SPA	ACE is less tha ACF is less tha	n 20, enter "20." n 3. enter "3."		ADDIT.			OR	ADDII. FE		
"	the "Highest Num	nber Pre	eviously Pai	id For (Total o	r Inde	pendent) is the	highest number	foun	d in the a	appr	opriate box ir	n column	n 1.		

37.34

CPA

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 200

Application or Docket Number

09126884

CLAIMS AS FILED - PART I							SMALL ENTITY			•	OTHER THAN	
	TAL OLA 1140		(Column	1)	(Colu	mn 2)	1	YPE		OR	SMALL	ENTITY
IC	OTAL CLAIMS					internal of		RATE	FEE		RATE	FEE
FC	R		NUMBER I	FILED	NUMB	ER EXTRA		BASIC FEE	<del>3</del> <b>3</b> .80	OR	BASIC FEE	710.00
TC	TAL CHARGEA	BLE CLAIMS	2 / minus 20=		• 4			X\$ 9=	36	OR	X\$18=	
IND	EPENDENT CL	AIMS	_3 mi	nus 3 =				X40=		OR		
MU	ILTIPLE DEPEN	DENT CLAIM P	RESENT	-			Ī	+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ro, enter	"0" in c	olumn 2	ımn 2 TOTAL 44.0 OR TOTAL					
	CI	LAIMS AS A	MENDED	- PAR	T II			•		ı	OTHER	THAN
		(Column 1)		(Colur		(Column 3)		SMALL E	ENTITY	OR	SMALL E	
ENT A	4	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- 01 4144			X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JUIPLE DEF	· ·	CLAIM			+135=		OR	(* +270=	
				**		•	L	TOTAL		, ,	TOTAL	
							Δ	DDIT. FEE		OR .	ADDIT. FEE	
		(Column 1) CLAIMS		(Colui		(Column 3)	1 -					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
			1	1		1 1	1 1					
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
MENDM	Total Independent	*	Minus Minus	**		=		X\$ 9= X40=	•		X\$18= X80=	
AMENDM	Independent	*  *  NTATION OF M	Minus	***	CLAIM			X40=		OR OR	X80=	
AMENDM	Independent	* NTATION OF M	Minus	***	CLAIM			X40= +135=			X80= +270=	
AMENDM	Independent	* NTATION OF M	Minus	***	CLAIM			X40=	•	OR OR	X80=	
AMENDM	Independent	* NTATION OF M	Minus	***				X40= +135=		OR OR	X80= +270=	
	Independent		Minus	*** PENDENT	mn 2) IEST BER OUSLY	=		X40= +135=	ADDI- TIONAL FEE	OR OR	X80= +270=	ADDI- TIONAL FEE
	Independent	(Column 1) CLAIMS REMAINING AFTER	Minus	(Colui	mn 2) IEST BER OUSLY	(Column 3)		X40= +135= TOTAL NDDIT. FEE	TIONAL	OR OR	X80= +270= TOTAL ADDIT. FEE	TIONAL
	Independent FIRST PRESE  Total Independent	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	Minus  ULTIPLE DEF	(Colui HIGH NUM PREVI PAID	mn 2) JEST BER OUSLY FOR	(Column 3)  PRESENT EXTRA  =	<i>A</i>	X40= +135= TOTAL NDDIT. FEE	TIONAL	OR OR OR	X80= +270= TOTAL ADDIT. FEE	TIONAL
AMENDMENT & AMENDM	Independent FIRST PRESE  Total Independent	(Column 1) CLAIMS REMAINING AFTER	Minus  ULTIPLE DEF	(Colui HIGH NUM PREVI PAID	mn 2) JEST BER OUSLY FOR	(Column 3)  PRESENT EXTRA  =		X40=  +135= TOTAL ADDIT. FEE  RATE  X\$ 9=	TIONAL	OR OR	X80= +270= TOTAL ADDIT. FEE  RATE  X\$18=  X80=	TIONAL
AMENDMENT &	Independent FIRST PRESE  Total Independent FIRST PRESE	(Column 1) CLAIMS REMAINING AFTER AMENDMENT  TO THE TOTAL	Minus  ULTIPLE DEF  Minus  Minus  IULTIPLE DEI	(Colui HIGH NUM PREVI PAID	mn 2) IEST BER DUSLY FOR  CLAIM	(Column 3)  PRESENT EXTRA  =		X40= +135= TOTAL NDDIT. FEE XS 9= X40= +135=	TIONAL	OR OR OR	X80= +270= TOTAL ADDIT. FEE RATE X\$18= X80= +270=	TIONAL
AMENDMENT &	Independent FIRST PRESE  Total Independent	(Column 1) CLAIMS REMAINING AFTER AMENDMENT  NTATION OF M mn 1 is less than to	Minus  ULTIPLE DEF  Minus  Minus  IULTIPLE DEF	COULT HIGH NUM PREVICE PAID TO SPACE	mn 2) IEST BER DUSLY FOR  CLAIM  e "0" in co	(Column 3)  PRESENT EXTRA  = = = slumn 3. in 20, enter "20.		X40=  +135=  TOTAL NDDIT. FEE  RATE  X\$ 9=  X40=	TIONAL	OR OR OR	X80= +270= TOTAL ADDIT. FEE  RATE  X\$18=  X80=	TIONAL FEE

## This Form is for INTERNAL PTO USE ONLY It do NOT get mailed to the plicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09126884

## **Total Fee Calculation**

		Total	Number					
· ·	Fee Code	# Claims	Extra	X	Fee	Fee	=	Total
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101					190.00	=	190.00
Total Claims >20	203/103	5 -20=		x			. =	· · ·
Independent Claims >3	202/102			x	<u> </u>		=	
Mult. Dep Claim Present	204/104						=	
Surcharge	205/105					20.00	=	135.00
English Translation	139					•		
TOTAL FEE CALCUL	ATION	,						900.00
Fees due upon filing	the application	:						
Total Filing Fees Due	e = S_	920,00		<del></del>				
Less Filing Fees Sub	mitted - S	Ø		_				
BALANCE DUE	= \$	920.00						
Office of Initial Pater	nt Examination	·						

Figure 7